

## **PPG Meeting minutes – 28 May 2020**

### **Attendees:**

Robert Gurd  
Owen Grainger  
Moir Black  
Jean Rowe  
Roisin Holden  
Jill Morris  
Dr Charlotte Mendes da Costa

### **Apologies:**

Ann Smith  
Emma Hayter  
David Jenkins

**Sangeeta Kathuria** (Manager and Chair of meeting) (SK)

### **POINTS DISCUSSED**

#### **FUTURE OF THE SURGERY**

Members of the PPG voiced their concerns about the future of the surgery and Dr Keen's retirement plans. There were concerns expressed about the future of small practices and how they may be at risk to close due to lack of support from NHS England. SK explained that firstly Dr Keen has changed his plans and there are no plans of retirement this year until further notice. If and when he does plan to retire then we will speak to the PPG members in a proper discussion about this and talk about the future of the surgery. SK also assured them that we work as part of the PCN (primary care network) where there are many small single handed practices as well and there has been no risk to them to date. There are options also, to move to another location as was done with this surgery many years ago when it moved to this address from around the corner. There could be opportunities to join another practice or go into a bigger health centre. However these options need to be discussed only if and when the time arrives to talk about it. Dr Mendes discussed the workings of the PCN and their support too.

The delay of the works to the Chiswick Health Centre was discussed and a question was asked about the movement of the patients from there and the impact to our surgery. SK responded that those patients will be relocated to a surgery in the interim when the works start, in Stamford Brook however, should any patient wish to register with our surgery, our doors will be open too.

#### **REMOTE / VIDEO CONSULTATIONS**

MB wanted to discuss the way the surgery is working around our appointments system under the current pandemic situation. SK discussed how we are not seeing patients at present and are using telephone and video triaging for all GP appointments and patients are only asked to come in, if the

GP requires seeing them. Nurse appointments are also being carried out in the majority on the phone or video calls.

SK explained the new software that we have been using called Accurx that allows us to send a quick text to the patient with a link asking us to join on for a video consultation if needed. We can also send text messages with information to patients during consultations via this software including leaflets and links and videos that can support their condition. We are not using Skype as this is a bit redundant and Accurx doesn't require patients to have a log in name etc. Just a mobile phone which has the facilities to accept the link and work with the software.

SK also talked about how this situation has brought to light the fact that we are realising now how many patients don't have to actually come in to the surgery and can be reviewed remotely, and this is something that we are going to be looking at incorporating into practice even after the pandemic subsides.

MB also commented on the fact that when a face to face consultation happens, many a time the patient remembers something else they may wish to discuss before leaving the room however this may not always be the case with a video or tel consultation. SK however did confirm that the time allocated to the remote consultation is exactly the same as the patient would get if they were to come in and hence, there are given adequate time to discuss their issues in entirety if needed.

SK discussed the use of eConsult which is a platform set up to be used via the website and how patients can write in for less urgent issues, and have their queries sent in electronically to the GP. The photos, paperwork etc is all saved in the patient record which is then seen and reviewed by the GP who will action this accordingly i.e. get a script sorted for the patient or ask them to book for a blood test etc.

RG asked if we are using the new system called airmid which many surgeries have been using however SK stated that we are not using this as we have Accurx and we don't want to try using too many different platforms for remote consultations. One reason is that this may lead to confusion for the staff and patient but also, each software has its own terms and conditions and length of a licence which is not always beneficial to the practice, especially if we have to start paying for multiple platforms.

Dr Mendes discussed the one downside of the remote consultation in that it sometimes causes waste of appointments in that a patient can be spoken to in the morning and have a triage and may need to come in the afternoon. This means double consultation time that can waste appointment times. She also discussed how consultation methods have transformed overnight and there have been hiccups with connections for example but the benefits do outweigh the cons. Patients can be out of the country for example and have a video consult too.

SK suggested that perhaps once we go back to some normality, we can do a patient survey where we can ask patients what they prefer with regard to choice of appointments which can make the surgery design a robust and well accepted system to suit everyone. We will welcome comments and suggestions from patients to help us make this a better system.

OG commented on how tel and video consults are a benefit to reduce waiting times and patients don't have to sit in the waiting room but can have a consultation from their home where if there is a delay in the GPs time, then the patient doesn't need to sit and wait in the waiting room for a long time to be seen.

SK agreed this is a valid point however to strike the right balance we need to also look at the cohort of patients who are elderly who may not have access to smart phones or tablets and would prefer to come in to see the GP for that "chat" element and to have contact with someone. There has to be a balance with some trial and error.

A question was put forward about whether Accurx the video consult software can be used on a laptop ipad or computer and the answer to that is yes. The patient can use the browser of their computer and as long as they have a camera on the device, it can be done without a phone. This link shows more information about this

<https://support accurx.com/en/articles/3790662-my-gp-has-sent-me-a-video-link>

### **PRESCRIPTION SYSTEM IN PLACE**

MB discussed an issue she had with her prescription being sent to the wrong chemist and SK confirmed that she has looked into this and will speak to her separately as this was a personal concern with her prescription.

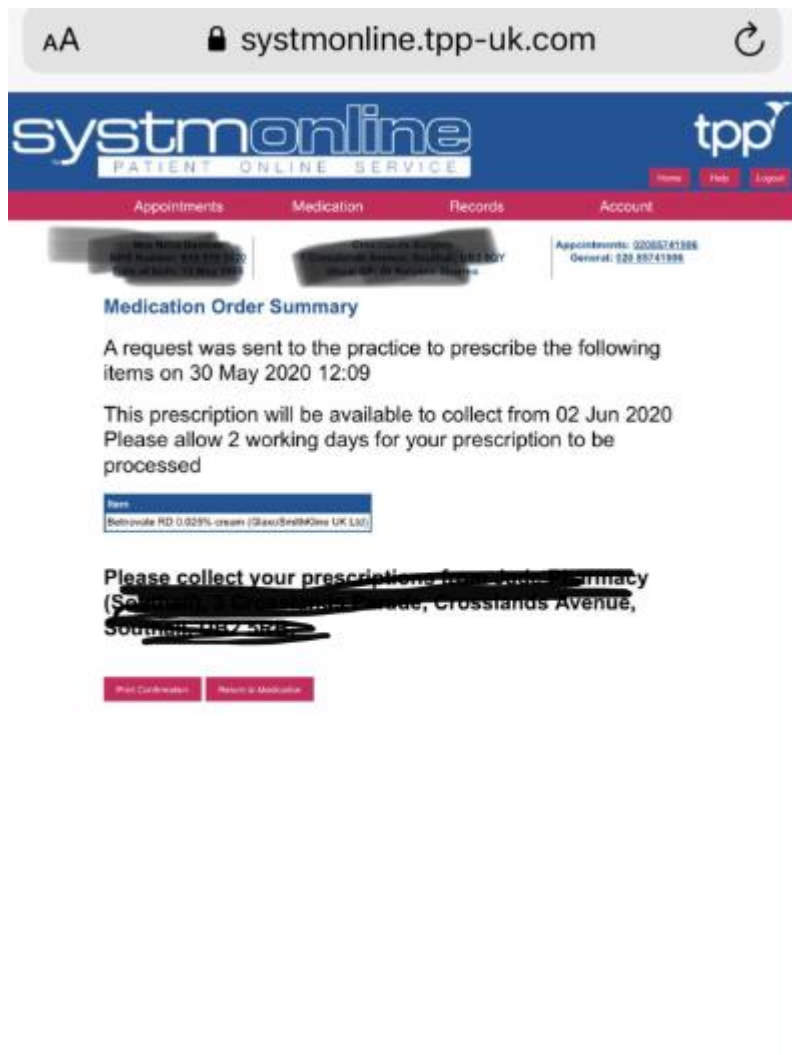
SK then went on to discuss the new prescription system in place which is EPS4 whereby all prescriptions are sent electronically to the nominated chemist chosen by the patient. No printed scripts are now given and if a nominated chemist isn't chosen then the patient needs to collect a printed token to take to a chemist of their choice to get the medication.

OG brought to light an issue that was discussed in the previous meeting whereby there were concerns that pharmacies were ordering everything on a patients repeat list regardless of whether they needed this or not which was causing a problem with stockpiling. SK explained that she has spoken to two pharmacies about this and they have confirmed that they only order and email the surgery for medication that has been either requested by the patient or that is due i.e. a batch prescription.

RG commented on a problem that he has encountered in that when ordering a prescription on system one there is no feedback to say that the medication request has gone through.

SK has looked into this and there is a message that does come up to state that a prescription has been ordered via system one which the patient can see when they place the order – see photo of one example below. That is the only

confirmation that patients will get when ordering their prescription. It tells the patient when to collect the prescription and what was ordered. This is the task that is received by the surgery to do the prescription.



### **GP PRESENCE AT MEETINGS**

MB requested that a GP should be present for all PPG meetings and SK assured her that this will be something that will be done for the forthcoming meetings. Dr Mendes da Costa will be attending them.

### **NHS APP**

JR discussed the NHS APP which she was told about by friends. She talked about how the App requires a high security features, i.e. photo ID and NHS numbers etc.

SK discussed that there is such an APP in place however it is quite a laborious task to register ones details to set it up. It holds patients notes and access to appointments etc. and hence, the security is very strict and takes a long time to set it in place. It's similar to systm one online. SK will put this up on the website for patients to learn about and try out as well but there is a link below for the members to see.

<https://www.nhs.uk/using-the-nhs/nhs-services/the-nhs-app/>

### **CORONAVIRUS FILE ON WEBSITE**

SK discussed that moving forward she is going to put up an information page on the website for patients to tell them about the coronavirus, support pages, links or videos where patients can obtain guidance, support etc. She has asked if any members want to suggest what can be put up on it to email or call her.

RH asked if we are reaching out to our vulnerable patients during the coronavirus pandemic and SK explained how we are ensuring all the patients who are on our shielding list as extremely high risk, are being called by the nurse or GP to have a care plan and a review on how they are getting on under the circumstances, offering help or support if needed. This list is checked weekly and updated if necessary.

### **NEW MEMBERS**

It was discussed that we should try and get more members and SK felt that the new Zoom remote meeting may be enticing for patients to be able to sit at home and join a meeting. She will advertise this as a plus point to get more members in to join the group.

**SK obtained consent to share the audio call of the meeting with the members and she will send the link to all members.**

### **NEXT MEETINGS DATE**

**Thurs 23 Jul at 16.30 via ZOOM**